

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09-674969

FILING DATE

07 NOV 2000

APPLICANT(S)

Goldsch

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			INC.		DEP.		INC.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		INC.	DEP.	INC.	DEP.	INC.	DEP.		
1							51								
2							52								
3							53								
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43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.	2						TOTAL IND.								
TOTAL DEP.	14						TOTAL DEP.								
TOTAL CLAIMS	16						TOTAL CLAIMS								